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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/560,469	04/28/2000	JOSEPH A FERNANDO	UNF-9058-A	3786
23575 7590 07/19/2012 CURATOLO SIDOTI CO., LPA 24500 CENTER RIDGE ROAD, SUITE 280 CLEVELAND, OH 44145				
EXAMINER				
LEUNG, JENNIFER A				
ART UNIT		PAPER NUMBER		
1774				
MAIL DATE		DELIVERY MODE		
07/19/2012		PAPER		

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.




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**Board of Patent Appeals and Interferences**

	Appeal No:	2012-001554
CURATOLO SIDOTI CO., LPA	Appellant:	JOSEPH A FERNANDO, et al.
24500 CENTER RIDGE ROAD,	Application No:	09/560,469
SUITE 280	Hearing Room:	D
CLEVELAND, OH 44145	Hearing Docket:	A
	Hearing Date:	Thursday, November 08, 2012
	Hearing Time:	01:00 PM
	Location:	Madison Building - East Wing
		600 Dulany Street, 9th Floor
		Alexandria, Virginia 22313-1450

**NOTICE OF HEARING**  
**CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquires, please contact the Clerk of the Board at 571-272-9797.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

**BPAI HEARINGS FAX No:** (571) 273-0299

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In all communications relating to this appeal, please identify the appeal by its number.

**CHECK ONE:** ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED

Signature of Attorney/Agent/Appellant

Date

Registration No.

Names of other visitors expected to accompany counsel:

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